

Second Regular Session 118th General Assembly (2014)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2013 Regular Session and 2013 First Regular Technical Session of the General Assembly.

SENATE ENROLLED ACT No. 233

AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 25-0.5-1-2.3 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: **Sec. 2.3. IC 25-1-1.1-4 applies to an individual licensed or certified under IC 25-3.7 (anesthesiologist assistants).**

SECTION 2. IC 25-0.5-1-5.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: **Sec. 5.5. IC 25-1-1.1-4 applies to an individual licensed or certified under IC 25-14.3 (diabetes educators).**

SECTION 3. IC 25-0.5-2-34 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: **Sec. 34. IC 25-1-2-2.1 applies to licenses held by anesthesiologist assistants.**

SECTION 4. IC 25-0.5-2-35 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: **Sec. 35. IC 25-1-2-2.1 applies to licenses held by diabetes educators.**

SECTION 5. IC 25-3.7 IS ADDED TO THE INDIANA CODE AS A **NEW** ARTICLE TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]:

ARTICLE 3.7. ANESTHESIOLOGIST ASSISTANTS



Chapter 1. Definitions

Sec. 1. As used in this article, "anesthesiologist assistant" means an individual who:

- (1) meets the qualifications under this article; and
- (2) is licensed under this article.

Sec. 2. As used in this article, "board" refers to the medical licensing board of Indiana.

Chapter 2. Licensure

Sec. 1. (a) The board shall license as an anesthesiologist assistant an individual who:

- (1) applies for licensure on a form approved by the board;
- (2) pays a licensing fee in an amount determined by the board;
- (3) does not have a conviction for a crime that has a direct bearing on the applicant's ability to practice competently; and
- (4) submits evidence satisfactory to the board that the applicant meets all the following requirements:

(A) Has obtained a bachelor's degree from a postsecondary educational institution.

(B) Has satisfactorily completed a medical-based anesthesiologist assistant program that is accredited by the Commission on Accreditation of Allied Health Education Programs, or by its predecessor or successor organization.

(C) Has passed a certifying examination administered by the National Commission for Certification of Anesthesiologist Assistants, or a successor organization.

(D) Is certified by the National Commission for Certification of Anesthesiologist Assistants, or a successor organization.

(b) An individual must be licensed by the board before the individual may practice as an anesthesiologist assistant.

Sec. 2. In order to maintain a license under this article, an individual licensed under this article shall comply with all continuing certification requirements set by the National Commission for Certification of Anesthesiologist Assistants or a successor organization.

Sec. 3. (a) The board shall do the following:

- (1) Subject to IC 25-1-8-2, establish the amounts of fees required under this article.
- (2) Adopt rules under IC 4-22-2 concerning the scope of practice for an anesthesiologist assistant. The rules must address the public welfare and safety of patients being treated



by an anesthesiologist assistant and include the following:

(A) Require that an anesthesiologist assistant be supervised by a licensed anesthesiologist who:

- (i) is licensed under IC 25-22.5;
- (ii) is actively engaged in the clinical practice of anesthesiology; and
- (iii) maintains a physical proximity that allows the anesthesiologist to be available immediately if needed at all times that anesthesia services are rendered by the anesthesiologist assistant.

(B) Allow for the training of anesthesiologist assistant students if a student is:

- (i) enrolled in an anesthesiologist assistant program that is accredited by the Commission on Accreditation of Allied Health Education Programs or by its predecessor or successor organization; and
- (ii) supervised by an individual who meets the requirements of clause (A).

(b) In developing the rules required under subsection (a)(2), the board shall appoint a working committee to assist in the development of the rules. The working committee must contain at least the following:

- (1) One (1) individual who is a member of the Indiana State Medical Association, or its successor organization.
- (2) One (1) individual who is a member of the Indiana Society of Anesthesiologists, or its successor organization.
- (3) One (1) individual who is a member of the American Academy of Anesthesiologist Assistants, or its successor organization.

Sec. 4. (a) An anesthesiologist assistant may practice only:

- (1) under the supervision of an anesthesiologist; and
- (2) as described in a written practice protocol adopted under subsection (b).

(b) Each anesthesiologist who agrees to act as the supervising anesthesiologist of an anesthesiologist assistant shall adopt a written practice protocol that:

- (1) is consistent with this article;
- (2) delineates:
 - (A) the medical services that the anesthesiologist assistant is authorized to provide; and
 - (B) the manner in which the anesthesiologist will supervise the anesthesiologist assistant;



(3) is based on relevant quality assurance standards, including regular review by the supervising anesthesiologist of the medical records of the patients cared for by the anesthesiologist assistant;

(4) is signed by the anesthesiologist and anesthesiologist assistant;

(5) is updated annually; and

(6) is made available to the board upon request.

(c) The supervising anesthesiologist shall oversee the anesthesiologist assistant in accordance with:

(1) the terms of the protocol; and

(2) any rules adopted by the board for the supervision of an anesthesiologist assistant.

The board may randomly audit or inspect any written practice protocol under which an anesthesiologist assistant works.

(d) An anesthesiologist or an anesthesiologist assistant who violates the written practice protocol described in this section may be disciplined under IC 25-1-9.

Chapter 3. Unauthorized Practice; Penalty; Sanctions

Sec. 1. An individual may not:

(1) profess to be an anesthesiologist assistant;

(2) use the title "anesthesiologist assistant"; or

(3) use the initials "A.A." or any other words, letters, abbreviations, or insignia indicating or implying that the individual is an anesthesiologist assistant licensed under this article;

unless the person is licensed under this article.

Sec. 2. An individual who recklessly, knowingly, or intentionally violates this chapter commits a Class B misdemeanor.

SECTION 6. IC 25-14.3 IS ADDED TO THE INDIANA CODE AS A NEW ARTICLE TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]:

ARTICLE 14.3. DIABETES EDUCATORS

Chapter 1. Definitions

Sec. 1. The definitions in this chapter apply throughout this article.

Sec. 2. "Agency" refers to the Indiana professional licensing agency established by IC 25-1-5-3.

Sec. 3. "Board" refers to the medical licensing board of Indiana established by IC 25-22.5-2-1.

Sec. 4. "Diabetes education" means a collaborative process through which persons with or at risk for diabetes mellitus gain the



knowledge and skills needed to modify behavior and successfully self-manage diabetes and conditions related to diabetes.

Sec. 5. "Licensed diabetes educator" refers to an individual who is licensed under this article.

Chapter 2. Duties of the Board

Sec. 1. (a) The board shall adopt rules under IC 4-22-2 establishing:

- (1) standards for professional responsibility or a code of ethics for the profession of diabetes educator;**
- (2) standards of practice that are based upon policies and positions adopted by the American Association of Diabetes Educators; and**
- (3) standards for continuing education requirements for diabetes educators.**

(b) The board shall adopt rules under IC 4-22-2 to establish fees under IC 25-1-8-2 for:

- (1) filing an application for licensure under this article;**
- (2) issuing an original license under this article;**
- (3) renewing a license issued under this article;**
- (4) replacing a license that has been lost or destroyed; and**
- (5) any other purposes prescribed by IC 25-1-8-2.**

(c) The board shall investigate alleged violations brought under this article, conduct investigations, and schedule and conduct administrative hearings under IC 4-21.5.

(d) The board shall keep a record of:

- (1) the proceedings of the board; and**
- (2) all individuals licensed by the board.**

Chapter 3. License Requirements

Sec. 1. After July 1, 2015, a person may not use the title of "licensed diabetes educator" or profess to be a licensed diabetes educator unless the person holds a license under this article.

Sec. 2. An applicant for a license must file a written application with the board on forms provided by the board.

Sec. 3. An applicant must provide evidence to the board showing successful completion of one (1) of the following:

- (1) The American Association of Diabetes Educators core concepts course with demonstrable experience in the care of individuals with diabetes under supervision that meets requirements specified in rules adopted by the board.**
- (2) The credentialing program of the American Association of Diabetes Educators or the National Certification Board for Diabetes Educators.**



(3) An equivalent credentialing program as determined by the board.

Sec. 4. Requirements established by the board for licensure under this article must include a core body of knowledge and skills in:

- (1) diabetes mellitus;**
- (2) biological and social sciences;**
- (3) communication;**
- (4) counseling;**
- (5) education; and**
- (6) experience in the care of individuals with diabetes.**

Sec. 5. A license issued under this chapter is valid for two (2) years after the date of issuance.

Sec. 6. The board shall require each licensee to complete annually fifteen (15) hours of board approved continuing education.

Chapter 4. License Revocation or Suspension

Sec. 1. For purposes of this chapter, "unprofessional conduct" includes the following:

- (1) Obtaining or attempting to obtain a license by fraud, misrepresentation, concealment of material facts, or making a false statement to the board.**
- (2) Conviction of a felony if the conviction has direct bearing on whether the person is trustworthy to serve the public as a licensed diabetes educator.**
- (3) Violation of any lawful order issued or rule adopted by the board.**

Sec. 2. The board may:

- (1) suspend or revoke a license; or**
- (2) issue a reprimand;**

if the licensee engages in unprofessional conduct that has endangered or is likely to endanger the health, welfare, or safety of the public.

Chapter 5. Unlawful Practices

Sec. 1. A person who recklessly, knowingly, or intentionally violates this article commits a Class A misdemeanor.

SECTION 7. IC 25-23-1-1, AS AMENDED BY P.L.232-2013, SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 1. As used in this chapter:

- (a) "Board" means the Indiana state board of nursing.**
- (b) "Advanced practice nurse" means:**
 - (1) a nurse practitioner;**



(2) a certified nurse midwife; ~~or~~

(3) a clinical nurse specialist; **or**

(4) a certified registered nurse anesthetist;

who is a registered nurse qualified to practice nursing in a specialty role based upon the additional knowledge and skill gained through a formal organized program of study and clinical experience, or the equivalent as determined by the board, which does not limit but extends or expands the function of the nurse which may be initiated by the client or provider in settings that shall include hospital outpatient clinics and health maintenance organizations. **Notwithstanding any other law, this subsection does not add to the powers and duties or scope of practice of certified registered nurse anesthetists as described in section 30 of this chapter.**

(c) "Human response" means those signs, symptoms, behaviors, and processes that denote the individual's interaction with the environment.

SECTION 8. IC 25-23-1-19.4, AS AMENDED BY P.L.105-2008, SECTION 43, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 19.4. **(a) This section does not apply to certified registered nurse anesthetists.**

~~(a)~~ **(b)** As used in this section, "practitioner" has the meaning set forth in IC 16-42-19-5. However, the term does not include the following:

(1) A veterinarian.

(2) An advanced practice nurse.

(3) A physician assistant.

~~(b)~~ **(c)** An advanced practice nurse shall operate in collaboration with a licensed practitioner as evidenced by a practice agreement, or by privileges granted by the governing board of a hospital licensed under IC 16-21 with the advice of the medical staff of the hospital that sets forth the manner in which an advanced practice nurse and a licensed practitioner will cooperate, coordinate, and consult with each other in the provision of health care to their patients.

SECTION 9. IC 25-23-1-19.5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 19.5. **(a) This section does not apply to certified registered nurse anesthetists.**

~~(a)~~ **(b)** The board shall establish a program under which advanced practice nurses who meet the requirements established by the board are authorized to prescribe legend drugs, including controlled substances (as defined in ~~IC 35-48-1~~). **IC 35-48-1-9).**

~~(b)~~ **(c)** The authority granted by the board under this section:

(1) expires on October 31 of the odd-numbered year following the year the authority was granted or renewed; and



(2) is subject to renewal indefinitely for successive periods of two (2) years.

~~(c)~~ **(d)** The rules adopted under section 7 of this chapter concerning the authority of advanced practice nurses to prescribe legend drugs must do the following:

- (1) Require an advanced practice nurse or a prospective advanced practice nurse who seeks the authority to submit an application to the board.
- (2) Require, as a prerequisite to the initial granting of the authority, the successful completion by the applicant of a graduate level course in pharmacology providing at least two (2) semester hours of academic credit.
- (3) Require, as a condition of the renewal of the authority, the completion by the advanced practice nurse of the continuing education requirements set out in section 19.7 of this chapter.

SECTION 10. IC 25-26-13-18, AS AMENDED BY P.L.159-2012, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 18. (a) To be eligible for issuance of a pharmacy permit, an applicant must show to the satisfaction of the board that:

- (1) Persons at the location will engage in the bona fide practice of pharmacy. The application must show the number of hours each week, if any, that the pharmacy will be open to the general public.
- (2) The pharmacy will maintain a sufficient stock of emergency and frequently prescribed drugs and devices as to adequately serve and protect the public health.
- (3) Except as provided in section 19 of this chapter, a registered pharmacist will be in personal attendance and on duty in the licensed premises at all times when the practice of pharmacy is being conducted and that the pharmacist will be responsible for the lawful conduct of the pharmacy.
- (4) ~~Certified~~ **Licensed** pharmacy technicians or pharmacy technicians in training **who are licensed or** certified under IC 25-26-19 must practice under a licensed pharmacist's immediate and personal supervision at all times. A pharmacist may not supervise more than six (6) pharmacy technicians or pharmacy technicians in training at any time. As used in this subdivision, "immediate and personal supervision" means within reasonable visual and vocal distance of the pharmacist.
- (5) The pharmacy will be located separate and apart from any area containing merchandise not offered for sale under the pharmacy permit. The pharmacy will:
 - (A) be stationary;



(B) be sufficiently secure, either through electronic or physical means, or a combination of both, to protect the products contained in the pharmacy and to detect and deter entry during those times when the pharmacy is closed;

(C) be well lighted and ventilated with clean and sanitary surroundings;

(D) be equipped with a sink with hot and cold running water or some means for heating water, a proper sewage outlet, and refrigeration;

(E) have a prescription filling area of sufficient size to permit the practice of pharmacy as practiced at that particular pharmacy; and

(F) have such additional fixtures, facilities, and equipment as the board requires to enable it to operate properly as a pharmacy in compliance with federal and state laws and regulations governing pharmacies.

(b) Prior to opening a pharmacy after receipt of a pharmacy permit, the permit holder shall submit the premises to a qualifying inspection by a representative of the board and shall present a physical inventory of the drug and all other items in the inventory on the premises.

(c) At all times, the wholesale value of the drug inventory on the licensed items must be at least ten percent (10%) of the wholesale value of the items in the licensed area.

SECTION 11. IC 25-26-19-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 4. (a) The board may adopt rules under IC 4-22-2 to:

- (1) implement and enforce this chapter;
- (2) set fees under IC 25-1-8; and
- (3) establish education and training requirements for ~~certification~~ **licensure** to practice as a pharmacy technician.

(b) The board shall:

- (1) establish standards for the competent practice of pharmacy technicians; and
- (2) subject to IC 4-21.5, IC 25-1-7, and IC 25-1-9, conduct proceedings on any matter under the jurisdiction of the board.

SECTION 12. IC 25-26-19-5, AS AMENDED BY P.L.159-2012, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 5. (a) The board shall issue a pharmacy technician ~~certificate~~ **license** to an individual who:

- (1) applies to the board in the form and manner prescribed by the board;
- (2) is at least eighteen (18) years of age;



(3) has:

(A) graduated from high school; or

(B) received a:

(i) high school equivalency certificate; or

(ii) state general educational development (GED) diploma under IC 20-20-6 (before its repeal) or IC 22-4.1-18;

~~(3)~~ **(4) has not been convicted of:**

(A) a crime that has a direct bearing upon the individual's ability to practice competently; or

(B) a felony involving controlled substances;

~~(4)~~ **(5) is not in violation of this chapter or rules adopted by the board under section 4 of this chapter;**

~~(5)~~ **(6) has paid the fee set by the board under section 4 of this chapter; and**

~~(6)~~ **(7) has: completed a program of education and training approved by the board or has passed a certification examination offered by a nationally recognized certification body approved by the board.**

(A) graduated from a competency based pharmacy technician education and training program approved by the board;

(B) completed an employer provided training program that:

(i) beginning July 1, 2015, uses training requirements and minimum standards developed by the board;

(ii) has been approved by the board; and

(iii) includes specific training in the duties required to assist the pharmacist in the technical functions associated with the practice of pharmacy; or

(C) successfully passed a certification examination offered by the Pharmacy Technician Certification Board or another nationally recognized certification body approved by the board.

(b) For good cause, the board may waive the age requirement under subsection (a)(2).

(c) A person who has been certified or licensed as a pharmacy technician by the board before July 1, 2014, and who remains in good standing on July 1, 2014, shall, for all purposes, be considered licensed beginning on July 1, 2014. A person described in this subsection is subject to the license renewal requirements set forth in this chapter.



(d) A training program approved by the board before July 1, 2015, must be resubmitted to the board for approval in meeting current standards.

SECTION 13. IC 25-26-19-6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 6. (a) The board shall issue a pharmacy technician in training permit to an individual who:

- (1) applies to the board in the form and manner prescribed by the board;
- (2) is at least eighteen (18) years of age;
- (3) has not been convicted of a crime that has a direct bearing upon the individual's ability to practice competently;
- (4) is not in violation of this chapter or rules adopted by the board under section 4 of this chapter; and
- (5) has applied for ~~certification~~ **licensure** under section 5 of this chapter.

(b) An applicant:

- (1) may work as a pharmacy technician in training without a permit for not more than thirty (30) consecutive days after the applicant files an application under this section;
- (2) shall provide the applicant's employer with a receipt issued by the board that:
 - (A) provides the date an application under this section was filed; and
 - (B) indicates that the fee has been paid;
 before the applicant may begin work as a pharmacy technician in training; and
- (3) may request an additional thirty (30) day period to practice as a pharmacy technician in training without a permit. The board may approve a request under this subdivision if the board determines that the extension is for good cause.

(c) A pharmacy technician in training permit expires on the earliest of the following:

- (1) The date the permit holder is issued a pharmacy technician ~~certificate~~ **license** under this chapter.
- (2) The date the board disapproves the permit holder's application for a pharmacy technician ~~certificate~~ **license** under this chapter.
- (3) The date the permit holder ceases to be enrolled in good standing in a pharmacy technician training program approved by the board. The graduation of a permit holder from a pharmacy technician program does not cause the permit to expire under this subdivision.
- (4) Sixty (60) days after the date that the permit holder



successfully completes a program approved by the board.

(5) Twelve (12) months after the date of issuance.

(d) For good cause, the board may waive the age requirement in subsection (a)(2).

SECTION 14. IC 25-26-19-7, AS AMENDED BY P.L.1-2006, SECTION 466, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 7. (a) A pharmacy technician ~~certificate~~ **license** expires on a date set by the Indiana professional licensing agency in each even-numbered year.

(b) An application for renewal of a pharmacy technician ~~certificate~~ **license** must be accompanied by the appropriate fee.

(c) If a person fails to renew a pharmacy technician ~~certificate~~, **license**, the ~~certificate~~ **license** may be reinstated by meeting the requirements under IC 25-1-8-6.

(d) The board may require a person who applies for a ~~certificate~~ **license** under subsection (c) to appear before the board and explain the reason why the person failed to renew a pharmacy technician ~~certificate~~. **license**.

SECTION 15. IC 25-26-19-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 8. A ~~certified~~ **licensed** pharmacy technician may not perform the following activities:

(1) Providing advice or consultation with the prescribing practitioner or other licensed health care provider regarding the patient or the interpretation and application of information contained in the prescription or drug order, medical record, or patient profile.

(2) Providing advice or consultation with the patient regarding the interpretation of the prescription or the application of information contained in the patient profile or medical record.

(3) Dispensing prescription drug information to the patient.

(4) Final check on all aspects of the completed prescription and assumption of the responsibility for the filled prescription, including the appropriateness of the drug for the patient and the accuracy of the:

(A) drug dispensed;

(B) strength of the drug dispensed; and

(C) labeling of the prescription.

(5) Receiving a new prescription drug order over the telephone or electronically unless the original information is recorded so a pharmacist may review the prescription drug order as transmitted.

(6) Any activity required by law to be performed only by a pharmacist.



(7) Any activity that requires the clinical judgment of a pharmacist and is prohibited by a rule adopted by the board.

SECTION 16. IC 25-26-19-9, AS AMENDED BY P.L.158-2013, SECTION 290, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 9. (a) An individual may not practice as a pharmacy technician unless the individual is ~~certified~~ **licensed** under this chapter.

(b) An individual may not act as a pharmacy technician in training unless the individual has obtained a permit under this chapter or the individual is acting as a pharmacy technician in training during the period permitted under section 6(b) of this chapter.

(c) An individual who knowingly violates this section commits a Level 6 felony.

SECTION 17. IC 35-51-25-1, AS AMENDED BY P.L.13-2013, SECTION 147, P.L.232-2013, SECTION 26, AND P.L.264-2013, SECTION 16, IS CORRECTED AND AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2014]: Sec. 1. The following statutes define crimes in IC 25:

IC 25-2.1-13-3 (Concerning accountants).

IC 25-2.5-3-4 (Concerning acupuncturists).

IC 25-3.7-3-2 (Concerning anesthesiologist assistants).

IC 25-5.1-4-2 (Concerning athletic trainers).

IC 25-5.2-2-12 (Concerning athlete agents).

IC 25-6.1-7-1 (Concerning auctioneers and auctions).

IC 25-6.1-7-2 (Concerning auctioneers and auctions).

IC 25-8-15.4-25 (Concerning beauty culture).

IC 25-10-1-11 (Concerning chiropractors).

IC 25-11-1-12 (Concerning collection agencies).

IC 25-13-1-3 (Concerning dental hygienists).

IC 25-14-1-25 (Concerning dentists).

IC 25-14-1-25.5 (Concerning dentists).

IC 25-14-4-6 (Concerning dentists).

IC 25-14.3-5-1 (Concerning diabetes educators).

IC 25-14.5-7-2 (Concerning dietitians).

IC 25-16-1-18 (Concerning employment services).

IC 25-17.3-5-3 (Concerning genetic counselors).

IC 25-17.6-8-2 (Concerning geologists).

IC 25-18-1-19 (Concerning distress sales).

IC 25-20-1-21 (Concerning hearing aid dealers).

IC 25-20.7-5-1 (Concerning interior designers).

IC 25-21.5-5-10 (Concerning ~~land~~ professional surveyors).

IC 25-21.5-13-2 (Concerning ~~land~~ professional surveyors).



IC 25-21.8-7-1 (Concerning massage therapists).
 IC 25-22.5-8-2 (Concerning physicians).
 IC 25-22.5-8-3 (Concerning physicians).
 IC 25-23-1-27 (Concerning nurses).
 IC 25-23.4-3-7 (*Concerning certified direct entry midwives*).
 IC 25-23.5-3-2 (Concerning occupational therapists).
 IC 25-23.6-3-3 (Concerning marriage and family therapists).
 IC 25-23.6-4-4 (Concerning marriage and family therapists).
 IC 25-23.6-4.5-4 (Concerning marriage and family therapists).
 IC 25-23.6-7-7 (Concerning marriage and family therapists).
 IC 25-23.6-10.1-6 (Concerning marriage and family therapists).
 IC 25-23.6-11-1 (Concerning marriage and family therapists).
 IC 25-23.6-11-2 (Concerning marriage and family therapists).
 IC 25-23.6-11-3 (Concerning marriage and family therapists).
 IC 25-23.7-7-5 (Concerning manufactured home installers).
 IC 25-24-1-18 (Concerning optometrists).
 IC 25-24-3-17 (Concerning optometrists).
 IC 25-26-13-29 (Concerning pharmacists, pharmacies, and drug stores).
 IC 25-26-14-23 (Concerning pharmacists, pharmacies, and drug stores).
 IC 25-26-14-25 (Concerning pharmacists, pharmacies, and drug stores).
 IC 25-26-14-26 (Concerning pharmacists, pharmacies, and drug stores).
 IC 25-26-14-27 (Concerning pharmacists, pharmacies, and drug stores).
 IC 25-26-19-9 (Concerning pharmacists, pharmacies, and drug stores).
 IC 25-26-21-11 (Concerning pharmacists, pharmacies, and drug stores).
 IC 25-27-1-12 (Concerning physical therapists).
 IC 25-27.5-7-2 (Concerning physician assistants).
 IC 25-28.5-1-31 (Concerning plumbers).
 IC 25-29-9-1 (Concerning podiatrists).
 IC 25-30-1-21 (Concerning private investigator firms, security guards, and polygraph examiners).
 IC 25-30-1.3-23 (Concerning private investigator firms, security guards, and polygraph examiners).
 IC 25-31-1-13 (Concerning engineers).
 IC 25-31-1-27 (Concerning engineers).
 IC 25-31.5-8-7 (Concerning soil scientists).



IC 25-33-1-15 (Concerning psychologists).
IC 25-34.5-3-2 (Concerning respiratory care specialists).
IC 25-35.6-3-10 (Concerning speech pathologists and audiologists).
IC 25-36.1-1-2 (Concerning surgical technologists).
IC 25-36.5-1-10 (Concerning timber buyers).
IC 25-36.5-1-15 (Concerning timber buyers).
IC 25-38.1-4-10 (Concerning veterinarians).
IC 25-38.1-4-11 (Concerning veterinarians).
IC 25-39-5-1 (Concerning water well drilling contractors).
IC 25-39-5-7 (Concerning water well drilling contractors).
IC 25-41-1-2 (Concerning behavior analysts).



President of the Senate

President Pro Tempore

Speaker of the House of Representatives

Governor of the State of Indiana

Date: _____ Time: _____

